



Commonwealth
of Massachusetts

Form CPF M 102: Campaign Finance Report Municipal Form

TOWN CLERK'S OFFICE
ARLINGTON, MA 02174

Office of Campaign and Political Finance

2012 APR -3 AM 11:27

File with: City or Town Clerk or Election Commission

Fill in Reporting Period dates:

Beginning Date:

2/17/12

Ending Date:

4-1-12

4-1-2012

Type of Report: (Check one)

☐ 8th day preceding preliminary

☒ 8th day preceding election

☐ 30 day after election

☐ year-end report

☐ dissolution

ROBERT L TOSI JR

Candidate Full Name (if applicable)

SELECTMAN ARLINGTON

Office Sought and District

14 INVERNESS RD ARL MA 02476

Residential Address

Telephone Number (optional):

781-646-8120

THE COMMITTEE TO ELECT BOB TOSI

Committee Name

ROBERT L. TOSI SR.

Name of Committee Treasurer

14 INVERNESS RD. ARL MA 02476

Committee Mailing Address

Telephone Number (optional):

781-646-8120

SUMMARY BALANCE INFORMATION:

Line 1: Ending Balance from previous report

-0-

Line 2: Total receipts this period (page 3, line 11)

6606.61

Line 3: Subtotal (line 1 plus line 2)

6606.61

Line 4: Total expenditures this period (page 5, line 14)

5988.68

Line 5: Ending Balance (line 3 minus line 4)

617.93

Line 6: Total in-kind contributions this period (page 6)

0

Line 7: Total (all) outstanding liabilities (page 7)

0

Line 8: Name of bank(s) used:

CITIZENS BANK

Affidavit of Committee Treasurer:

I certify that I have examined this report including attached schedules and it is, to the best of my knowledge and belief, a true and complete statement of all campaign finance activity, including all contributions, loans, receipts, expenditures, disbursements, in-kind contributions and liabilities for this reporting period and represents the campaign finance activity of all persons acting under the authority or on behalf of this committee in accordance with the requirements of M.G.L. c. 55.

Signed under the penalties of perjury:

Robert L Tosi Sr.

(Treasurer's signature)

Date:

4/2/12

FOR CANDIDATE FILINGS ONLY: Affidavit of Candidate: (check 1 box only)

Candidate with Committee and no activity independent of the committee

☒ I certify that I have examined this report including attached schedules and it is, to the best of my knowledge and belief, a true and complete statement of all campaign finance activity, of all persons acting under the authority or on behalf of this committee in accordance with the requirements of M.G.L. c. 55. I have not received any contributions, incurred any liabilities nor made any expenditures on my behalf during this reporting period.

Candidate without Committee OR Candidate with independent activity filing separate report

☐ I certify that I have examined this report including attached schedules and it is, to the best of my knowledge and belief, a true and complete statement of all campaign finance activity, including contributions, loans, receipts, expenditures, disbursements, in-kind contributions and liabilities for this reporting period and represents the campaign finance activity of all persons acting under the authority or on behalf of this committee in accordance with the requirements of M.G.L. c. 55.

Signed under the penalties of perjury:

Robert L Tosi Jr.

(Candidate's signature)

Date:

4/2/12

SCHEDULE A: RECEIPTS

M.G.L. c. 55 requires that the name and residential address be reported, in alphabetical order, for all receipts over \$50 in a calendar year. Committees must keep detailed accounts and records of all receipts, but need only itemize those receipts over \$50. In addition, the occupation and employer must be reported for all persons who contribute \$200 or more in a calendar year.

(A "Schedule A: Receipts" attachment is available to complete, print and attach to this report, if additional pages are required to report all receipts. Please include your committee name and a page number on each page.)

Date Received	Name and Residential Address (alphabetical listing required)	Amount	Occupation & Employer (for contributions of \$200 or more)
3/4/12	BULENS ROBERT F 27 WELLESLEY RD. ARL. MA	100.-	
3/4/12	DEYST MARY A. 26 UPLAND RD WEST ARL MA.	150-	
3/04/12	DOLAN MICHAEL J. 2 OLD COLONY RD. ARL MA.	100-	
3/03/12	DOWNS EDWARD J. 82 ORVIS RD. ARL MA	200-	RETIRED
2/29/12	DOYLE CHRISTOPHER 1 RICHFIELD RD. ARL MA 02474	250	CONSULTANT BEL ASSOC. INC 220 RESERVOIR ST NEEDHAM MA
3/04/12	DUFFY RICHARD 122 APPELTON ST. ARL MA 02476	200.-	H.R. EXECUTIVE
3/04/12	HAASE CAMILLA B. 88 PARK AVE APT 401 ARL. MA.	100.-	
3/04/12	PERNETTA SANDRA 31 Tanager St ARL MA	100-	
3/03/12	RONAYNE ELEANOR 28 GROVE ST. ARL. MA	100-	
2/19/12	RANDALL MARILYN 75 WALLING RD. ADAMS MA. 01220	100-	
3/13/12	TOSI MICHELE 4 GILMORE RD FRAMINGHAM MA 01701 104	500-	HOUSEWIFE
2/17/12	TOSI ROBERT L. SR. 14 INVERNESS RD ARL. MA 02476	500-	RETIRED
Line 9: Total Receipts over \$50 (or listed above)			
Line 10: Total Receipts \$50 and under* (not listed above)			
Line 11: TOTAL RECEIPTS IN THE PERIOD			← Enter on page 1, line 2

* If you have itemized receipts of \$50 and under, include them in line 9. Line 10 should include only those receipts not itemized above.

SCHEDULE A: RECEIPTS (continued)

Date Received	Name and Residential Address (alphabetical listing required)	Amount	Occupation & Employer (for contributions of \$200 or more)
2/17/12	TOSI ROBERT L JR 14 INVERNESS RD ARL MA 02474	1000-	CASE MANAGER MINUTE MAN SR. SERVICES 24 THIRD AVE BURLINGTON MA
3/17/12	VIVERO CHRISTOPHER 635 LONGLEY RD GROTON MA 01450	500-	LEAD WEB DEVELOPER TSD 1629 TURNPIKE ST NORTH ANDOVER MA 01845
2/12/12	WINKLER LENOIRE 10 SLEEPY HOLLOW LN. ARLINGTON MA 02474	100-	
2/17/12	TOSI CARMELLA 14 INVERNESS RD ARL MA 02474	500-	RETIRED/HOUSEWIFE
Line 9: Total Receipts over \$50 (or listed above)		4500.-	
Line 10: Total Receipts \$50 and under* (not listed above)		2106.61	
Line 11: TOTAL RECEIPTS IN THE PERIOD		6606.61	← Enter on page 1, line 2

* If you have itemized receipts of \$50 and under, include them in line 9. Line 10 should include only those receipts not itemized above.

SCHEDULE B: EXPENDITURES

M.G.L. c. 55 requires committees to list, in alphabetical order, all expenditures over \$50 in a reporting period. Committees must keep detailed accounts and records of all expenditures, but need only itemize those over \$50. Expenditures \$50 and under may be added together, from committee records, and reported on line 13.

(A "Schedule B: Expenditures" attachment is available to complete, print and attach to this report, if additional pages are required to report all expenditures. Please include your committee name and a page number on each page.)

Date Paid	To Whom Paid (alphabetical listing)	Address	Purpose of Expenditure	Amount
2/17/12 2/27/12	ARL. KOFC.	1 WINSLOW ST ARL. MA	HALL RENTAL	250.-
2/27/12	CONNOLLY PRINTING	17B GILL ST. WOBURN MA	CARD PRINTING	245. ⁵⁰
2/27/12	CONNOLLY PRINTING	17B GILL ST WOBURN MA	SIGNS & CARD PRINTING	1,328. ¹³
2/29/12	CONNOLLY PRINTING	17B GILL ST WOBURN MA	BUMPER STICKERS	191. ²⁵
3/4/12	D'AGOSTINO'S	1297 MASS AVE ARL. MA 02476	FOOD VEG. TRAY	53.50
2/17/12	THE PICTURE PEOPLE DIGITAL PHOTO PHOTO PICTURE PEOPLE	75 MIDDLESEX RD TURNPIKE BURL. MA 01803	PHOTOS	119. ³⁸
3/22/12	MVS PUBLISHING	35 BEDFORD ST LEXINGTON MA TOWNSEND MA	ADD ARL. SHOPPER	570.-
2/21/12	POSTMASTER BOSTON	BOSTON MA.	STAMPS	180.-
3/19/12	QUEST MAILING SERV. INC.	167 BOW STREET EVERETTE MA	MAILING	467.89
3/28/12	QUEST MAILING SERV INC	167 BOW ST. EVERETTE MA	MAILING	745. ³¹
3/19/12	SWIFTY PRINTING ARL	1386 MASS AVE ARL. MA	PRINTING	795. ³⁶
3/27/12	SWIFTY PRINTING ARL.	1386 MASS AVE ARL. MA.	PRINTING	957. ²⁶
Line 12: Total Expenditures over \$50 (or listed above)				
Line 13: Total Expenditures \$50 and under* (not listed above)				
Enter on page 1, line 4 → Line 14: TOTAL EXPENDITURES IN THE PERIOD				

* If you have itemized expenditures of \$50 and under, include them in line 12. Line 13 should include only those expenditures not itemized above.

SCHEDULE B: EXPENDITURES (continued)[illegible]

* If you have itemized expenditures of \$50 and under, include them in line 12. Line 13 should include only those expenditures not itemized above.